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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/591,783		Filing Date 12/06/2006		To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
FOR			NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
	BASIC FEE		N/A		N/A		N/A	122 (0)	ı	N/A	TLL (0)	
┢	(37 CFR 1.16(a), (b), s SEARCH FEE	or (c))	N/A				<del></del>					
Ë	(37 CFR 1.16(k), (i), (ii)				N/A		N/A		ı	N/A		
TO	(37 CFR 1.16(o), (p), (	or (q))	N/A		N/A		N/A			N/A		
(37	CFR 1.16(i))		minus 20 = *				x \$ =		OR	x \$ =		
	EPENDENT CLAIM CFR 1.16(h))	s	minus 3 = *				x \$ =			x s =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addi	ts of pap 50 (\$125 tional 50 t	gs exceed 100 in size fee due for each in thereof. See CFR 1.16(s).								
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))												
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL		ı	TOTAL		
APPLICATION AS AMENDED - PART II  OTHER THAI  (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENT												
AMENDMENT	10/09/2009	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(1)	· 22	Minus	22	= 0	l	x \$ =		OR	X \$52=	0	
	Independent (37 CFR 1.16(h))	• 2	Minus	···3	= 0	ı	x \$ =		OR	X \$220=	0	
	Application Size Fee (37 CFR 1.16(s))											
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0	
		(Column 1)		(Column 2)	(Column 3)							
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.1801)		Minus	**	=	1	x \$ =		OR	x s =		
	Independent (37 CFR 1.16(h))	*	Minus	***		1	x \$ =		OR	x \$ =		
	Application Size Fee (37 CFR 1.16(s))											
ΑM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
Γ						•	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
If the entry in column 1 is less than the entry in column 2, write 0° in column 3. If the "Highest Municipal Providers Mark For IN THIS SPACE is less than 30, enter "20".  If the "Highest Number Proviously Paul For IN THIS SPACE is less than 3, enter "20".  If the "Highest Number Proviously Paul For IN THIS SPACE is less than 3, enter "20".  ALSA THOMAS!												

This collection of information is required by 37 CFR. 1.16. The information is required to obtain or retain a benefit by the public with in is to life (and by the LISPTO to process) an application. Confidentiality is overwined by 80 LSC. 1.22 and 37 CFR. 1.14. This collection is estimated to their bet 2 minutes to complete including gathering, preparing, and submitting the completed application form to the LUSPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer. U. S. Patent and Trademark. Office, U.S. Department of Commerce, P.O. Box 1450, Alexandris, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandris, VA 22313-1450.